

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan (Mr. EHLERS) is recognized for 5 minutes.

(Mr. EHLERS addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio (Mr. BROWN) is recognized for 5 minutes.

(Mr. BROWN of Ohio addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

(Mr. BURTON of Indiana addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. WATERS) is recognized for 5 minutes.

(Ms. WATERS addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

#### PRESCRIPTION DRUG BILL

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Minnesota (Mr. GUTKNECHT) is recognized for 5 minutes.

Mr. GUTKNECHT. Mr. Speaker, tonight I would like to talk about an issue that is becoming increasingly of concern to the American citizens, and that is the high prices that Americans in general and seniors in particular are being required to pay for prescription drugs.

A number of stories have appeared recently. A number of national news publications, MSNBC, the New York Times, a number of stories, the Washington Post, a Minneapolis paper recently did stories about what is happening in America relative to the high cost of prescription drugs.

Now, it has a tremendous impact on all Americans, but of particularly high impact on senior citizens where many of the people in my district, and I suspect this is not unusual to my district, it happens all over the country, seniors are paying two, three, four, in fact I talked to one couple that is paying over \$1,000 a month for prescription drugs. It is a serious problem. It is here now. Every one has an opinion.

But let me just talk about what I think is one part of the problem that we could do something very serious about solving very quickly.

But before I do, I would like to read excerpts from a letter to the community from George Halvorson. George Halvorson is the president and CEO of HealthPartners in Minneapolis.

Let me just read, "The cost of prescription drugs varies to an amazing degree between countries.

"If you have a stomach ulcer and your doctor says, 'you need to be on Prilosec,' you would probably pay about \$99.95 for a 30-day supply in the Twin Cities. But if you were vacationing in Canada and decided to fill your prescription there, you would pay only \$50.88.

"Or, even better, if you were looking for a little warmer weather south of the border in Mexico, the same 30-day supply would cost you only \$17.50.

"That's for the same dose, made by the same manufacturer.

"If we could get only half the price break that Canadians get, our plan alone", he is talking about one HMO in Minnesota, he says, "our plan alone could have saved our members nearly \$35 million last year."

Imagine what we are talking about throughout the entire country. He goes on to say, "When the North American Free Trade Act (NAFTA) was passed by Congress to allow free trade between us and our neighboring countries, HealthPartners decided to follow the lead of in Minnesota Senior Federation and buy drugs in Canada at Canadian prices. We were disappointed to learn of the rules and processes that kept us from succeeding. There is no free trade in prescription drugs. We need to do something about this."

Well, I tell Mr. Halvorson, we intend to do something about it. But before we do something, one has got to understand what the problem is. It all comes down to section 381 of U.S. Code, Title XXI, section 381.

Let me just read for my colleagues what this section basically says. "The Secretary of Treasury shall deliver to the Secretary of Health and Human Services, upon his request, samples of food, drugs, devices, and cosmetics which are being imported or offered for import into the United States." The operative expression is "giving notice thereof to the owner or consignee".

It goes on to basically say that people can bring drugs into the country as long as they are legal drugs and they have a prescription. But if there is a challenge to them, the burden of proof falls upon the FDA.

But, unfortunately, Mr. Speaker, that is not what is happening. What is happening today is, when seniors try to bring drugs, and particularly if they do it through mail order, back into the United States, the FDA puts the burden of proof on the seniors to prove that they are legal drugs and were manufactured in an FDA-approved facility.

What I am going to be doing here in the next day or two is introducing legislation to clarify that Americans will be able, going through their local pharmacy, to order drugs over the Internet or by web or through faxes with correspondent pharmacies in Canada or in Mexico as long as they are legal drugs produced in an FDA-approved facility to allow them to do that.

We are talking about savings for some seniors of \$300 or \$400 per month.

Now, that may not seem like much to some of the folks in this room, but let me tell my colleagues, if one is living on a fixed income of \$10,000, we are beginning to talk real money.

It is time for us to say loudly and clearly that we will not allow the FDA to stand between our consumers and our seniors in particular. We will not allow the FDA to stand between our consumers and lower drug prices.

It is a simple bill. I would hope that my colleagues would contact my office because we want to make this a broad-based bipartisan coalition to support this bill. We hope to introduce it in the next day or two. Please take a look at this legislation. We would like to have my colleagues join us on it.

#### STOP STALLING ON GUN SAFETY LEGISLATION

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Ms. JACKSON-LEE) is recognized for 5 minutes.

Ms. JACKSON-LEE of Texas. Mr. Speaker, we finished one major piece of legislation, and I noted that many of the Members of this House were applauding the success of passing a financial services reform bill. I think there are many people in America that will appreciate that we have made that giant step.

But in the shadow of passing a bill that deals with numbers, statistics, and pieces of paper, and computers, we are still stalled on a real gun safety reform legislation and juvenile justice.

What a tragedy that, in about 5 days, more than 100 hours from now, this House may come to a conclusion for 1999. We will do so in the shadow of seven deaths in Hawaii, two deaths in Seattle in the last 48 hours by individuals obviously deranged and using guns to kill people.

We will do it, likewise, in the shadow of four murders of teenagers this past weekend in Washington, D.C., in the shadow of a closing of a Cleveland high school where it is alleged that about four students have threatened to kill many, many students in that high school; or do it in the shadow of conversations we had just a few weeks ago that noted that many students that go to high school in America are fearful for their lives, are afraid of violence, have seen guns, have been bullied, have experienced prejudice.

Yet, the conference that is supposed to be on gun safety and juvenile justice idles away its time, refusing to concede to the National Rifle Association, refusing to provide real gun safety for America.

What are the issues that we are discussing in that conference? Are they so threatening to those of us who have taken an oath of office to do what is best for the American people that we would not want to do it?

Does it make any sense that we continue to allow guns to get in the hands of criminals and children? Does it